

## SPECIALTY SERVICES FOR CHILDREN WITH ASD INITIAL START UP PROCESS

STEP	BEST PRACTICE GUIDANCE
CHILD DIAGNOSED WITH ASD	Child not in El needs to be referred;
	intake can be streamlined as federal
	regs allow eligibility based on outside
	medical records/diagnosis
EIP OBTAINS WRITTEN	EIP should contact Director of Office of
CONFIRMATION OF DIAGNOSIS	Specialty Services to review diagnoses
	that are unclear
EIP BEGINS PRIOR	□ MassHealth: complete "Checklist for
AUTHORIZATION PROCESS	MassHealth"-no prior authorization
WITH HEALTH PLANS	required
	□ Private insurance: to be determined
EIP INFORMS PARENTS OF SSP(s);	Parent signs agency "Consent to
PARENT SELECTS SSP(s) FOR	Exchange Information" form. EIP
INTAKE; PARENT AND SERVICE	sends SSP Referral form to area
COORDINATOR DETERMINE WHO	SSP(s) to ensure that parents are
WILL CONTACT SSP	provided with full range of options
	available in their area.
	EIP Service Coordinator adds entry to
	IFSP Review page (see sample below)
SSP(s) CONDUCTS INTAKE	SSP(s) completes "Consent for
	Evaluation/Assessment" form with
	parent; SSP(s) completes intake within
DADENT OF FOTO OOD, OOD	10 business days of referral
PARENT SELECTS SSP; SSP	EIP notifies all SSPs that did intakes of
BEGINS ASSESSMENT AND	parent selection; EIP shares diagnostic
TREATMENT PLANNING PROCESS	report with SSP. No IFSP entry is
	needed (Consent for Evaluation/Assessment signature
	authorizes this service and it was noted
	on IFSP Review page previously)
SSP COMPLETES ASSESSMENT	SSP notifies EIP when assessment
AND TREATMENT PLANNING	and treatment planning is close to
WITHIN 30 DAYS OF NOTIFICATION	completion so that Service Coordinator
OF SELECTION BY PARENT	can schedule IFSP meeting
EIP SCHEDULES IFSP MEETING TO	EIP sends "Individualized Family
DETERMINE SERVICE PLAN ASAP	Service Meeting Plan Notice" to SSP to
	ensure attendance/participation.
	Meeting is scheduled asap (no more
	than 10 days after completion of SSP
	child assessment/treatment planning).
	SSP continues with planning sessions
	to collect data, identify prompts and

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	reinforcers, establish relationship with child and family, etc.
IFSP MEETING IS HELD WITH PARENTS, EI SERVICE COORDINATOR, AND SSP REPRESENTATIVE	Intensity of SSP services, location, length/frequency of sessions, duration (of service) and providers (by discipline) are identified on IFSP;EIP and SSP set up communication plan, determine frequency of joint team meetings with parents. Copy of IFSP Service Delivery page is provided to SSP.
SSP SERVICES ARE DELIVERED ON ONGOING BASIS SPECIFIED IN IFSP	Any proposed changes in frequency of sessions are reviewed at an IFSP meeting

## **Suggested IFSP language:**

1. Entry on <u>IFSP Review Page</u> at time of referral to SSPs for child with confirmed diagnosis on the autism spectrum:

Referral to area SSPs (list by agency name) for int ake(s), and assessment and treatment plan development by agency selected by parent. At the conclusion of the assessment period, an IFSP meting will be scheduled.

2. Entry on <u>IFSP Service Delivery Page</u> at the conclusion of the IFSP meeting with parent, El Service Coordinator, and SSP representative to develop SSP section of the Service Delivery Plan:

Method/intensity Type of service	Location	Length/ frequency	Duration	Provider/discipline
Specialty Services	home and childcare	12hrs/wk	duration of IFSP	ABC Specialty Service Program*
Specialty Services Program planning an review	home nd	4 hrs/mo	duration of IFSP	Cindy Johns,** BCBA, ABC SSP

<sup>\*</sup>list agency, rather than individual program staff, for ongoing services section as the provider list is subject to change frequently and frequent revisions risk interfering with service delivery

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<sup>\*\*</sup>list supervising clinician by name on this line